

County: Abbeville

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
ABBEVILLE AREA MEDICAL CENTER	HTL-0899 / 07/31/2009	25
420 THOMSON CIR	Abbeville / County	
ABBEVILLE, SC 29620	PO BOX 887	
OSMUS, RICH PH#: 864-366-5011	ABBEVILLE, SC 29620-0887	
Fac. Cont. Email: No Fac Cont. email on record	ABBEVILLE COUNTY MEMORIAL HOSPITAL	
Licensed Beds: General: 25 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:Swing Bed Unit(s), Perinatal Level I, JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	1	Number Licensed Units	25
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Number of Activities/Facilities licensed in county of	Abbeville	# Lics	1
	Number Licensed Units :	25	

County: Aiken

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
AIKEN REGIONAL MEDICAL CENTER	HTL-0152 / 11/30/2009	230
302 UNIVERSITY PKWY	Aiken / Corporation	
AIKEN, SC 29801	302 UNIVERSITY PKWY	
MILANES, CARLOS PH#: 803-641-5383	AIKEN, SC 29801-6334	
Fac. Cont. Email: No Fac Cont. email on record	AIKEN REGIONAL MEDICAL CENTERS INC	
Licensed Beds: General: 183 Psychiatric: 29 Rehab: 0 Substance Abuse 18		
Other Beds NICU: 0 Neonatal Special Care 8		
Certifications:Perinatal Level II, JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	230

Number of Activities/Facilities licensed in county of Aiken	# Lics	1
Number Licensed Units :		230

County: Allendale

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
ALLENDALE COUNTY HOSPITAL	HTL-0041 / 04/30/2009	25
1787 ALLENDALE FAIRFAX HWY	Allendale / County	
FAIRFAX, SC 29827-0000	PO BOX 218	
HIATT, KEN PH#: 803-632-3311	FAIRFAX, SC 29827	
Fac. Cont. Email:ADMINKH@ACHOSPITAL.ORG	ALLENDALE COUNTY HOSPITAL	
Licensed Beds: General: 25 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:Swing Bed Unit(s), Critical Access Hospital		

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	25

Number of Activities/Facilities licensed in county of Allendale	# Lics	1
Number Licensed Units :	25	

Division of Health Licensing

County: Anderson

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
ANMED HEALTH MEDICAL CENTER	HTL-0044 / 11/30/2009	461
800 N FANT ST	Anderson / Non-Profit Corporation	
ANDERSON, SC 29621	800 N FANT ST	
MILLER JR, JOHN A PH#: 864-512-1109	ANDERSON, SC 29621	
Fac. Cont. Email: JERRY.PARRISH.ANMEDHEALTH.ORG	ANMED HEALTH	
Licensed Beds: General: 423 Psychiatric: 38 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: Trauma Center Level II, JCAHO Accredited

ANMED HEALTH REHABILITATION HOSPITAL	HTL-0838 / 12/31/2009	37
1 SPRINGBACK WAY	Anderson / Ltd. Liability	
ANDERSON, SC 29621-2676	1 SPRINGBACK WAY	
SKRIPPS, MICHELE M PH#: 864-716-2600	ANDERSON, SC 29621-2676	
Fac. Cont. Email: MICHELE.SKRIPPS@HEALTHSOUTH.COM	ANMED ENTERPRISES INC HEALTHSOUTH LLC	
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 37 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: JCAHO Accredited

ANMED HEALTH WELLSRING	HTL-0541 / 10/31/2009	27
313 WILLIAMS ST	Anderson / Non-Profit Corporation	
WILLIAMSTON, SC 29697	313 WILLIAMS ST	
FELEPPA, JOSEPH G PH#: 864-847-1050	WILLIAMSTON, SC 29697-1928	
Fac. Cont. Email: JOE.FELEPPA@ANMEDHEALTH.ORG	ANMED HEALTH	
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 0 Substance Abuse 27		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: JCAHO Accredited

ANMED HEALTH WOMEN'S AND CHILDREN'S HOSPITAL	HTL-0896 / 06/30/2009	72
2000 E GREENVILLE ST	Anderson / Non-Profit Corporation	
ANDERSON, SC 29621	2000 E GREENVILLE ST	
MILLER JR, JOHN A PH#: 864-512-1000	ANDERSON, SC 29621	
Fac. Cont. Email: ANMEDHEALTH.ORG	ANMED HEALTH	
Licensed Beds: General: 72 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 13		

Certifications: Perinatal Level II, JCAHO Accredited

PATRICK B HARRIS PSYCHIATRIC HOSPITAL	HTL-0503 / 11/30/2009	200
130 HWY 252	Anderson / State	
ANDERSON, SC 29621	PO BOX 2907	
FLETCHER, JOHN F PH#: 864-231-2600	ANDERSON, SC 29622	
Fac. Cont. Email: No Fac Cont. email on record	SC DEPARTMENT OF MENTAL HEALTH	
Licensed Beds: General: 0 Psychiatric: 200 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: JCAHO Accredited

County: Anderson

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date
Location Street	County/Ownership Typ
Location City, State	Mailing/Billing Addres
Administrator/Phone	Licensee
	Licensed Unit

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	5	Number Licensed Units	797
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Number of Activities/Facilities licensed in county of Anderson	# Lics	5
Number Licensed Units :	797	

County: Bamberg

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
BAMBERG COUNTY MEMORIAL HOSPITAL	HTL-0029 / 05/31/2009	59
509 NORTH ST	Bamberg / County	
BAMBERG, SC 29003	509 NORTH ST	
MEYER, KURT PH#: 803-245-4321	BAMBERG, SC 29003	
Fac. Cont. Email: No Fac Cont. email on record	BAMBERG COUNTY MEMORIAL HOSPITAL BOARD	
Licensed Beds: General: 59 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:Swing Bed Unit(s), Perinatal Level I, JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	59

Number of Activities/Facilities licensed in county of Bamberg	# Lics	1
Number Licensed Units :	59	

County: Barnwell

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
BARNWELL COUNTY HOSPITAL	HTL-0485 / 04/30/2009	53
811 REYNOLDS RD	Barnwell / County	
BARNWELL, SC 29812	811 REYNOLDS RD	
WATERS, ROBERT E PH#: 803-541-4365	BARNWELL, SC 29812	
Fac. Cont. Email:RWATERS@BCHOSPITAL.ORG	BARNWELL COUNTY	
Licensed Beds: General: 53 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications:JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	53

Number of Activities/Facilities licensed in county of Barnwell	# Lics	1
Number Licensed Units :	53	

County: Beaufort

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
BEAUFORT MEMORIAL HOSPITAL 955 RIBAUT RD BEAUFORT, SC 29902 TOOMEY, RICHARD K PH#: 843-522-5200 Fac. Cont. Email:AMECHERLE@BMHSC.ORG	HTL-0026 / 11/30/2009 Beaufort / County 955 RIBAUT RD BEAUFORT, SC 29902 BEAUFORT COUNTY MEMORIAL HOSPITAL	197
Licensed Beds: General: 169 Psychiatric: 14 Rehab: 14 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 5		
Certifications:Trauma Center Level III, Perinatal Level II, JCAHO Accredited		
HILTON HEAD HOSPITAL 25 HOSPITAL CENTER BLVD HILTON HEAD ISLAND, SC 29926 LAMKIN, ELIZABETH PH#: 843-689-8206 Fac. Cont. Email:ELIZABETH.E.LAMKIN@TENETHEALTH.COM	HTL-0646 / 10/31/2009 Beaufort / Limited Liability Limited Partnership 25 HOSPITAL CENTER BLVD HILTON HEAD ISLAND, SC 29926 HILTON HEAD HEALTH SYSTEM L P	93
Licensed Beds: General: 93 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:Perinatal Level I, JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary

 Number of Activities/Facilities licensed: Number Licensed Units

Number of Activities/Facilities licensed in county of	Beaufort	# Lics	2
	Number Licensed Units :	290	

Division of Health Licensing

County: Charleston

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
BON SECOURS - ST FRANCIS XAVIER HOSPITAL 2095 HENRY TECKLENBURG DR CHARLESTON 29414 CARROLL, ALLEN P PH#: 843-402-1006 Fac. Cont. Email: ALLEN.CARROLL@RSFH.COM	HTL-0750 / 07/31/2009 Charleston / Non-Profit Corporation 2095 HENRY TECKLENBURG DR CHARLESTON, SC 29414 BON SECOURS-ST FRANCIS XAVIER HOSPITAL INC	204
Licensed Beds: General: 204 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 11		
Certifications: Trauma Center Level III, Perinatal Level II, JCAHO Accredited		
CITADEL INFIRMARY THE THE CITADEL, 171 MOULTRIE ST CHARLESTON, SC 29409 CAPELL, CAREY M PH#: 843-953-6847 Fac. Cont. Email: MEREEA@CITADEL.EDU	HTL-0035 / 05/31/2009 Charleston / State THE CITADEL, 171 MOULTRIE ST CHARLESTON, SC 29409 BOARD OF VISITORS THE CITADEL	38
Licensed Beds: General: 38 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: None		
EAST COOPER REGIONAL MEDICAL CENTER 1200 JOHNNIE DODDS BLVD MOUNT PLEASANT, SC 29464 RAMSEY, TOMMY PH#: 803-831-1101 Fac. Cont. Email: No Fac Cont. email on record	HTL-0447 / 12/31/2009 Charleston / Corporation 1200 JOHNNIE DODDS BLVD MOUNT PLEASANT, SC 29464 EAST COOPER COMMUNITY HOSPITAL INC	100
Licensed Beds: General: 100 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 6		
Certifications: Abortions, Perinatal Level II, JCAHO Accredited		
HEALTHSOUTH REHABILITATION HOSPITAL OF CHARLESTON 9181 MEDCOM ST NORTH CHARLESTON, SC 29406 POWELL, TROY G PH#: 843-820-7777 Fac. Cont. Email: TROY.POWELL@HEALTHSOUTH.COM	HTL-0648 / 01/31/2010 Charleston / Corporation 9181 MEDCOM ST NORTH CHARLESTON, SC 29406 TRIDENT NEUROSCIENCES CENTER INC	46
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 46 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: JCAHO Accredited		
KINDRED HOSPITAL - CHARLESTON 326 CALHOUN ST, THIRD FLOOR CHARLESTON, SC 29401 TALBERT, BRADLEY S PH#: 843-876-8340 Fac. Cont. Email: BRADLEY.TALBERT@KINDREDHEALTHCARE.COM	HTL-0764 / 12/31/2009 Charleston / Corporation 326 CALHOUN ST, THIRD FLOOR CHARLESTON, SC 29401 SPECIALTY HOSPITAL OF SOUTH CAROLINA INC	59
Licensed Beds: General: 59 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: JCAHO Accredited		

Division of Health Licensing

County: Charleston

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
MUSC MEDICAL CENTER 169 ASHLEY AVE CHARLESTON, SC 29425 SMITH, W STUART PH#: 843-792-3232 Fac. Cont. Email:SMITHSTU@MUSC.EDU	HTL-0811 / 11/30/2009 Charleston / District 169 ASHLEY AVE CHARLESTON, SC 29425 MEDICAL UNIVERSITY HOSPITAL AUTHORITY	689
Licensed Beds: General: 584 Psychiatric: 82 Rehab: 0 Substance Abuse 23 Other Beds NICU: 16 Neonatal Special Care 50		

Certifications:Abortions, Trauma Center Level I, Perinatal Level III Regional, JCAHO Accredited

PALMETTO LOWCOUNTRY BEHAVIORAL HEALTH LLC 2777 SPEISSEGGER DR CHARLESTON, SC 29405-8229 TOLLEY, CHERIE D PH#: 843-747-5830 Fac. Cont. Email:LAURA.LOVELL@PSYSOLUTIONS.COM	HTL-0729 / 08/31/2009 Charleston / Ltd. Liability 2777 SPEISSEGGER DR CHARLESTON, SC 29405-8229 PALMETTO LOWCOUNTRY BEHAVIORAL HEALTH LLC	80
Licensed Beds: General: 0 Psychiatric: 70 Rehab: 0 Substance Abuse 10 Other Beds NICU: 0 Neonatal Special Care 0		

Certifications:JCAHO Accredited

ROPER HOSPITAL INC 316 CALHOUN ST CHARLESTON, SC 29401 SEVERANCE, MATTHEW J PH#: 843-724-2901 Fac. Cont. Email:MATT.SEVERANCE@RSFH.COM	HTL-0063 / 10/31/2009 Charleston / Corporation 316 CALHOUN ST CHARLESTON, SC 29401-1113 ROPER HOSPITAL INC	440
Licensed Beds: General: 401 Psychiatric: 0 Rehab: 39 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 5		

Certifications:Trauma Center Level III, Perinatal Level II, JCAHO Accredited

TRIDENT MEDICAL CENTER 9330 MEDICAL PLAZA DR CHARLESTON, SC 29406-9104 GALATI, TODD PH#: 843-797-7000 Fac. Cont. Email:No Fac Cont. email on record	HTL-0777 / 04/30/2009 Charleston / Ltd. Liability 9330 MEDICAL PLAZA DR CHARLESTON, SC 29406-9195 TRIDENT MEDICAL CENTER LLC	296
Licensed Beds: General: 296 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 10		

Certifications:Abortions, Trauma Center Level III, Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	9	Number Licensed Units	1,952
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Number of Activities/Facilities licensed in county of	Charleston	# Lics	9
	Number Licensed Units :	1,952	

County: Cherokee

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
UPSTATE CAROLINA MEDICAL CENTER	HTL-0476 / 02/28/2009 (Renewal Pending)	125
1530 N LIMESTONE ST	Cherokee / Corporation	
GAFFNEY, SC 29340	1530 N LIMESTONE ST	
HOWELL, JOE D PH#: 864-487-1500	GAFFNEY, SC 29340	
Fac. Cont. Email: No Fac Cont. email on record	GAFFNEY H M A INC	
Licensed Beds: General: 125 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: Perinatal Level I, JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	125

Number of Activities/Facilities licensed in county of Cherokee	# Lics	1
Number Licensed Units :		125

County: Chester

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
CHESTER REGIONAL MEDICAL CENTER	HTL-0894 / 09/30/2009	82
1 MEDICAL PARK DR	Chester / Corporation	
CHESTER, SC 29706	ONE MEDICAL PARK DR	
TAVERNIER, PATRICE L PH#: 803-581-3151	CHESTER, SC 29706	
Fac. Cont. Email: PATRICE.TAVERNIER@CRMCSHMA-CORP.COM	CHESTER HMA INC	
Licensed Beds: General: 82 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	82

Number of Activities/Facilities licensed in county of Chester	# Lics	1
Number Licensed Units :	82	

County: Chesterfield

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	Licensed Unit

CHESTERFIELD GENERAL HOSPITAL	HTL-0681 / 03/31/2010	59
711 CHESTERFIELD HWY	Chesterfield / Limited Liability Limited Partnership	
CHERAW, SC 29520-0151	711 CHESTERFIELD HWY	
LYNCH, ELEANOR PH#:	CHERAW, SC 29520	
Fac. Cont. Email:	CHESERFIELD/MARLBORO L P	
No Fac Cont. email on record		

Licensed Beds: General:	59	Psychiatric:	0	Rehab:	0	Substance Abuse	0
Other Beds	NICU:	0	Neonatal Special Care	0			

Certifications: Swing Bed Unit(s), Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	1	Number Licensed Units	59
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Number of Activities/Facilities licensed in county of	Chesterfield	# Lics	1
	Number Licensed Units :	59	

Division of Health Licensing

County: Clarendon

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
CLARENDON MEMORIAL HOSPITAL	HTL-0012 / 07/31/2009	56
10 HOSPITAL ST	Clarendon / Non-Profit Corporation	
MANNING, SC 29102-0550	PO BOX 550	
FRYE, EDWARD R PH#: 803-435-8463	MANNING, SC 29102-0550	
Fac. Cont. Email: NDAVIS@CLARENDONHEALTH.COM	CLARENDON HOSPITAL DISTRICT	
Licensed Beds: General: 56 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: Perinatal Level I, JCAHO Accredited

TURBEVILLE CORRECTIONAL INSTITUTION INFIRMARY	HTL-0901 / 10/31/2009	8
1578 CLARENCE E COKER HWY	Clarendon / State	
TURBEVILLE, SC 29162	PO BOX 252	
HUGGINS, TINA BLAKELY PH#: 803-896-3161	TURBEVILLE, SC 29162	
Fac. Cont. Email: No Fac Cont. email on record	SC DEPT OF CORRECTIONS	
Licensed Beds: General: 8 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: None

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	2	Number Licensed Units	64
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Number of Activities/Facilities licensed in county of	Clarendon	# Lics	2
	Number Licensed Units :	64	

County: Colleton

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
COLLETON MEDICAL CENTER	HTL-0405 / 03/31/2010	131
501 ROBERTSON BLVD	Colleton / Corporation	
WALTERBORO, SC 29488	PO BOX 5001	
MONGELL, MITCHELL P PH#: 843-782-2000	WALTERBORO, SC 29488-5501	
Fac. Cont. Email: MITCH.MOGNELL@HCAHEALTHCARE.COM	WALTERBORO COMMUNITY HOSPITAL INC	
Licensed Beds: General: 131 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	131

Number of Activities/Facilities licensed in county of Colleton	# Lics	1
Number Licensed Units :		131

County: Darlington

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
CAROLINA PINES REGIONAL MEDICAL CENTER	HTL-0904 / 04/30/2009	116
1304 W BOBO NEWSOME HWY	Darlington / Limited Liability	
HARTSVILLE, SC 29550	1304 W BOBO NEWSOME HWY	
JONES, LANCE PH#: 843-339-4100	HARTSVILLE, SC 29550	
Fac. Cont. Email: No Fac Cont. email on record	HARTSVILLE HMA LLC	
Licensed Beds: General: 116 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 4		
Certifications: Trauma Center Level III, Perinatal Level II, JCAHO Accredited		
MCLEOD MEDICAL CENTER DARLINGTON	HTL-0631 / 12/31/2009	72
701 CASHUA FERRY RD	Darlington / Corporation	
DARLINGTON, SC 29532	PO BOX 1859	
GODBOLD, PATRICIA J PH#: 843-777-1100	DARLINGTON, SC 29540	
Fac. Cont. Email: PGODBOLD@MCLEODHEALTH.ORG	MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC	
Licensed Beds: General: 49 Psychiatric: 23 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: Swing Bed Unit(s), JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: Number Licensed Units

Number of Activities/Facilities licensed in county of Darlington # Lics 2
Number Licensed Units : 188

County: Dillon

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
MCLEOD MEDICAL CENTER DILLON	HTL-0854 / 09/30/2009	79
301 E JACKSON ST	Dillon / Non-Profit Corporation	
DILLON, SC 29536	PO BOX 1327	
LOCKLAIR, DEBORAH D PH#: 843-774-4111	DILLON, SC 29536-1327	
Fac. Cont. Email: DLOCKLAIR@MCLEODHEALTH.ORG	MCLEOD MEDICAL CENTER DILLON	
Licensed Beds: General: 79 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary		
Number of Activities/Facilities licensed:	1	Number Licensed Units
		79

Number of Activities/Facilities licensed in county of Dillon	# Lics	1
	Number Licensed Units :	79

County: Dorchester

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
LIEBER CORRECTIONAL INSTITUTION INFIRMARY	HTL-0874 / 04/30/2009	10
136 WILBORN AVE	Dorchester / State	
RIDGEVILLE, SC 29472	PO BOX 205	
POWELL, JOSEPH PH#: 843-875-3332	RIDGEVILLE, SC 29472	
Fac. Cont. Email:NONE	SC DEPT OF CORRECTIONS	
Licensed Beds: General: 10 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:None		
SUMMERVILLE MEDICAL CENTER	HTL-0780 / 04/30/2009	94
295 MIDLAND PKWY	Dorchester / Ltd. Liability	
SUMMERVILLE, SC 29485	295 MIDLAND PKWY	
JOHNSON, PATRICIA C PH#: 843-832-5101	SUMMERVILLE, SC 29485	
Fac. Cont. Email:PEARCE.FLEMING@HCAHEALTHCARE.COM	TRIDENT MEDICAL CENTER LLC	
Licensed Beds: General: 94 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 3		
Certifications:Abortions, Perinatal Level II, JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary			
Number of Activities/Facilities licensed:	2	Number Licensed Units	104
Number of Activities/Facilities licensed in county of	Dorchester	# Lics	2
	Number Licensed Units :	104	

County: Edgefield

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
EDGEFIELD COUNTY HOSPITAL	HTL-0479 / 03/31/2009 (Renewal	25
300 RIDGE MEDICAL PLAZA	Pending)	
EDGEFIELD, SC 29824	Edgefield / County	
GREGORY, SAMUEL S PH#: 803-637-3174	PO BOX 590	
	EDGEFIELD, SC 29824	
Fac. Cont. Email: RAY.PRICE@EDGEFIELDCOHOSPITAL.ORG	EDGEFIELD COUNTY HOSPITAL	
Licensed Beds: General: 25	Psychiatric: 0	
Other Beds	Rehab: 0	
NICU: 0	Substance Abuse	0
Neonatal Special Care	0	
Certifications: Swing Bed Unit(s), JCAHO Accredited, Critical Access Hospital		

Totals For Facility/License Type Hospital or Institutional General Infirmary		
Number of Activities/Facilities licensed:	1	Number Licensed Units
		25

Number of Activities/Facilities licensed in county of Edgefield	# Lics	1
	Number Licensed Units :	25

County: Fairfield

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
FAIRFIELD MEMORIAL HOSPITAL	HTL-0154 / 11/30/2009	25
102 US HWY 321 BYPASS N	Fairfield / County	
WINNSBORO, SC 29180	PO BOX 620	
WILLIAMS, MICHAEL L PH#: 803-635-5548	WINNSBORO, SC 29180-0620	
Fac. Cont. Email: No Fac Cont. email on record	FAIRFIELD MEMORIAL HOSPITAL BOARD OF TRUSTEES	
Licensed Beds: General: 25	Psychiatric: 0	Rehab: 0
Other Beds	NICU: 0	Substance Abuse 0
	Neonatal Special Care 0	
Certifications: Swing Bed Unit(s), JCAHO Accredited, Critical Access Hospital		

Totals For Facility/License Type Hospital or Institutional General Infirmary		
Number of Activities/Facilities licensed:	1	Number Licensed Units 25

Number of Activities/Facilities licensed in county of Fairfield	# Lics	1
	Number Licensed Units :	25

Division of Health Licensing

County: Florence

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
CAROLINAS HOSPITAL SYSTEM		
805 PAMPLICO HWY	HTL-0761 / 11/30/2009	310
FLORENCE, SC 29505	Florence / Corporation	
O'LOUGHLIN, JAMES F PH#: 843-674-5000	PO BOX 100550	
Fac. Cont. Email:JOLOUGHLIN@CAROLINASHOSPITAL.COM	FLORENCE, SC 29501-0550	
	QHG OF SOUTH CAROLINA INC	
Licensed Beds: General: 310 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:Trauma Center Level III, JCAHO Accredited		
CAROLINAS HOSPITAL SYSTEM CEDAR TOWER		
121 E CEDAR ST	HTL-0782 / 11/30/2009	66
FLORENCE, SC 29501-0000	Florence / Corporation	
O'LOUGHLIN, JAMES F PH#: 843-674-5000	PO BOX 100550	
Fac. Cont. Email:JOLOUGHLIN@CAROLINASHOSPITAL.COM	FLORENCE, SC 29501-0550	
	QHG OF SOUTH CAROLINA INC	
Licensed Beds: General: 0 Psychiatric: 12 Rehab: 42 Substance Abuse 12		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:JCAHO Accredited		
HEALTHSOUTH REHABILITATION HOSPITAL OF FLORENCE		
900 E CHEVES ST	HTL-0587 / 06/30/2009	88
FLORENCE, SC 29506	Florence / Corporation	
BOWMAN, PETE PH#:	900 E CHEVES ST	
Fac. Cont. Email:No Fac Cont. email on record	FLORENCE, SC 29506	
	HEALTHSOUTH REHABILITATION CENTER INC	
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 88 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:JCAHO Accredited		
LAKE CITY COMMUNITY HOSPITAL		
258 N RON MCNAIR BLVD	HTL-0897 / 05/31/2009	48
LAKE CITY, SC 29560-2462	Florence / District	
CAMPBELL JR, WILLIAM P PH#: 843-374-6120	PO BOX 1479	
Fac. Cont. Email:No Fac Cont. email on record	LAKE CITY, SC 29560	
	LOWER FLORENCE COUNTY HOSPITAL DISTRICT	
Licensed Beds: General: 48 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:Swing Bed Unit(s), JCAHO Accredited		

Division of Health Licensing

County: Florence

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC 555 E CHEVES ST FLORENCE 29506 SEGARS, MARIE G PH#: 843-777-2849 Fac. Cont. Email: MSEGARS@MCLEODHEALTH.ORG	HTL-0384 / 05/31/2009 Florence / Corporation PO BOX 100551 FLORENCE, SC 29501-0551 MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC	453
Licensed Beds: General: 453 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 12 Neonatal Special Care 28		
Certifications: Abortions, Trauma Center Level III, Perinatal Level III Regional, JCAHO Accredited		
REGENCY HOSPITAL OF SOUTH CAROLINA L L C 121 E CEDAR ST 4TH FLOOR FLORENCE, SC 29506 FILPI, JEANETTE PH#: 843-679-9000 Fac. Cont. Email: No Fac Cont. email on record	HTL-0824 / 09/30/2009 Florence / Ltd. Liability 121 E CEDAR ST 4TH FLOOR FLORENCE, SC 29506 REGENCY HOSPITAL OF SOUTH CAROLINA L L C	40
Licensed Beds: General: 40 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: JCAHO Accredited		
WOMEN'S CENTER OF CAROLINAS HOSPITAL SYSTEM 1590 FREEDOM BLVD FLORENCE, SC 29505 O'LOUGHLIN, JAMES F PH#: 843-674-5000 Fac. Cont. Email: No Fac Cont. email on record	HTL-0674 / 12/31/2009 Florence / Corporation PO BOX 100550 FLORENCE, SC 29501-0550 QHG OF SOUTH CAROLINA INC	20
Licensed Beds: General: 20 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 11		
Certifications: Perinatal Level II, JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: Number Licensed Units

Number of Activities/Facilities licensed in county of	Florence	# Lics	7
	Number Licensed Units :	1,025	

County: Georgetown

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
GEORGETOWN MEMORIAL HOSPITAL 606 BLACK RIVER RD GEORGETOWN, SC 29440-3304 BAILEY, BRUCE P PH#: 843-527-7000 Fac. Cont. Email: BBAILEY@GMHSC.COM	HTL-0007 / 08/31/2009 Georgetown / Non-Profit Corporation PO BOX 421718 GEORGETOWN, SC 29442-4203 GEORGETOWN MEMORIAL HOSPITAL	131
Licensed Beds: General: 131 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds NICU: 0 Neonatal Special Care: 5		

Certifications: Abortions, Perinatal Level II, JCAHO Accredited

WACCAMAW COMMUNITY HOSPITAL 4070 HWY 17 BYPASS S MURRELLS INLET, SC 29576 RESETAR, GAYLE L PH#: 843-652-1000 Fac. Cont. Email: GRESETAR@GEORGETOWNHOSPITALSYSTEM.ORG	HTL-0834 / 10/31/2009 Georgetown / Non-Profit Corporation 4070 HWY 17 BYPASS MURRELLS INLET, SC 29576 WACCAMAW COMMUNITY HOSPITAL INC	167
Licensed Beds: General: 124 Psychiatric: 0 Rehab: 43 Substance Abuse: 0 Other Beds NICU: 0 Neonatal Special Care: 2		

Certifications: Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	2	Number Licensed Units	298
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Number of Activities/Facilities licensed in county of	Georgetown	# Lics	2
	Number Licensed Units :	298	

Division of Health Licensing

County: Greenville

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
CAROLINA CENTER FOR BEHAVIORAL HEALTH		
2700 E PHILLIPS RD	HTL-0806 / 08/31/2009	89
GREER, SC 29650-4815	Greenville / Corporation	
WILLINGHAM, JOHN C PH#: 864-235-2335	2700 E PHILLIPS RD	
Fac. Cont. Email:JOHN.WILLINGHAM@UHSINC.COM	GREER, SC 29650	
	UHS OF GREENVILLE INC	
Licensed Beds: General: 0 Psychiatric: 76 Rehab: 0 Substance Abuse 13		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:JCAHO Accredited		
GREENVILLE MEMORIAL MEDICAL CENTER		
701 GROVE RD	HTL-0343 / 12/31/2009	845
GREENVILLE, SC 29605	Greenville / District	
WHITE, SUZANNE PH#: 864-455-8400	PLANNING DEPT-ISC 3RD FLOOR, 701 GROVE RD	
Fac. Cont. Email:GHSNET.GHS.ORG/	GREENVILLE, SC 29605	
	GREENVILLE HOSPITAL SYSTEM	
Licensed Beds: General: 746 Psychiatric: 46 Rehab: 53 Substance Abuse 0		
Other Beds NICU: 12 Neonatal Special Care 44		
Certifications:Trauma Center Level I, Perinatal Level III Regional, JCAHO Accredited		
GREER MEMORIAL HOSPITAL		
830 S BUNCOMBE RD	HTL-0906 / 08/31/2009	82
GREER, SC 29650-1521	Greenville / District	
MANSURE, JOHN PH#: 864-848-8130	701 GROVE RD	
Fac. Cont. Email:No Fac Cont. email on record	GREENVILLE, SC 29605	
	GREENVILLE HOSPITAL SYSTEM	
Licensed Beds: General: 82 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:Trauma Center Level III, Perinatal Level I		
HILLCREST MEMORIAL HOSPITAL		
729 SE MAIN ST	HTL-0204 / 09/30/2009	43
SIMPSONVILLE, SC 29681	Greenville / District	
BURNS, DENNIS PH#: 864-454-6151	PLANNING DEPT-ISC 3RD FLOOR, 701 GROVE RD	
Fac. Cont. Email:WWW.GHS.ORG	GREENVILLE, SC 29605	
	GREENVILLE HOSPITAL SYSTEM	
Licensed Beds: General: 43 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:JCAHO Accredited		
NORTH GREENVILLE HOSPITAL LONG TERM ACUTE CARE		
807 N MAIN ST	HTL-0853 / 08/31/2009	45
TRAVELERS REST, SC 29690	Greenville / District	
BATCHELOR, MICHAEL PH#: 864-455-9270	PLANNING ISC - 3RD FLOOR, 701 GROVE RD	
Fac. Cont. Email:PDEVORE@GHS.ORG	GREENVILLE, SC 29605	
	GREENVILLE HOSPITAL SYSTEM	
Licensed Beds: General: 45 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:JCAHO Accredited		

Division of Health Licensing

County: Greenville

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
PATEWOOD MEMORIAL HOSPITAL 175 PATEWOOD DR GREENVILLE, SC 29615 JONES, SCOTT R PH#: 864-797-1083 Fac. Cont. Email:GHS.ORG	HTL-0900 / 06/30/2009 Greenville / District PLANNING DEPARTMENT - ISC 3RD FLOOR, 701 GROVE RD GREENVILLE, SC 29605 GREENVILLE HOSPITAL SYSTEM	72
Licensed Beds: General: 72 Other Beds NICU: 0	Psychiatric: 0 Rehab: 0 Neonatal Special Care 0	Substance Abuse 0
Certifications:None		
REGENCY HOSPITAL OF GREENVILLE ONE ST FRANCIS DR, 4TH FLOOR GREENVILLE, SC 29601 JAMES, STEPHANIE R PH#: 864-255-1401 Fac. Cont. Email:JSUMNEY@REGENCYHOSPITAL.COM	HTL-0882 / 12/31/2009 Greenville / Ltd. Liability 3 ST FRANCIS DR, STE #440 GREENVILLE, SC 29601 REGENCY HOSPITAL OF GREENVILLE L L C	32
Licensed Beds: General: 32 Other Beds NICU: 0	Psychiatric: 0 Rehab: 0 Neonatal Special Care 0	Substance Abuse 0
Certifications:JCAHO Accredited		
SHRINERS' HOSPITAL FOR CHILDREN 950 W FARIS RD GREENVILLE, SC 29605-4255 FRALEY, GARY F PH#: 864-255-7942 Fac. Cont. Email:No Fac Cont. email on record	HTL-0069 / 02/28/2010 Greenville / Non-Profit Corporation 950 W FARIS RD GREENVILLE, SC 29605 SHRINERS' HOSPITAL FOR CHILDREN	50
Licensed Beds: General: 50 Other Beds NICU: 0	Psychiatric: 0 Rehab: 0 Neonatal Special Care 0	Substance Abuse 0
Certifications:JCAHO Accredited		
SPRINGBROOK BEHAVIORAL HEALTHCARE SYSTEM 1 HAVENWOOD LN TRAVELERS REST, SC 29690 JACKSON, KEITH PH#: 864-834-8013 Fac. Cont. Email:No Fac Cont. email on record	HTL-0442 / 08/31/2009 Greenville / Corporation PO BOX 1005 TRAVELERS REST, SC 29690 CHESTNUT HILL MENTAL HEALTH CENTER INC	20
Licensed Beds: General: 0 Other Beds NICU: 0	Psychiatric: 20 Rehab: 0 Neonatal Special Care 0	Substance Abuse 0
Certifications:JCAHO Accredited		

Division of Health Licensing

County: Greenville

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
ST FRANCIS - DOWNTOWN ONE ST FRANCIS DR GREENVILLE, SC 29601 RUTLEDGE, VALINDA R PH#: 864-255-1000 Fac. Cont. Email:VRUTLEDGE@STFRANCISHEALTH.ORG	HTL-0794 / 12/31/2009 Greenville / Corporation ONE ST FRANCIS DR GREENVILLE, SC 29601 ST FRANCIS HOSPITAL INC	245
Licensed Beds: General: 226 Psychiatric: 0 Rehab: 19 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:JCAHO Accredited		
ST FRANCIS - EASTSIDE 125 COMMONWEALTH DR GREENVILLE, SC 29615 RUTLEDGE, VALINDA R PH#: 864-255-1000 Fac. Cont. Email:VRUTLEDGE@STFRANCISHEALTH.ORG	HTL-0793 / 12/31/2009 Greenville / Corporation 125 COMMONWEALTH DR GREENVILLE, SC 29615 ST FRANCIS HOSPITAL INC	93
Licensed Beds: General: 93 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 10		
Certifications:Perinatal Level II, JCAHO Accredited		
W J BARGE MEMORIAL HOSPITAL 1700 WADE HAMPTON BLVD GREENVILLE, SC 29614-0001 SHEYS, GERALD H PH#: 864-242-5100 Fac. Cont. Email:No Fac Cont. email on record	HTL-0302 / 03/31/2010 Greenville / Non-Profit Corporation 1700 WADE HAMPTON BLVD GREENVILLE, SC 29614-0001 BOB JONES UNIVERSITY INC	79
Licensed Beds: General: 79 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:None		

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	12	Number Licensed Units	1,695
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Number of Activities/Facilities licensed in county of Greenville	# Lics	12
Number Licensed Units :	1,695	

County: Greenwood

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
GREENWOOD REGIONAL REHABILITATION HOSPITAL 1530 PKWY GREENWOOD, SC 29646 KAGLE, TIM PH#: 864-330-9070 Fac. Cont. Email:TIMKAGLE@ERNESTHEALTH.COM	HTL-0903 / 10/31/2009 Greenwood / Ltd. Liability 1530 PKWY GREENWOOD, SC 29646 GREENWOOD REGIONAL REHABILITATION HOSPITAL LLC	34
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 34 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		

Certifications:JCAHO Accredited

SELF REGIONAL HEALTHCARE 1325 SPRING ST GREENWOOD, SC 29646-3860 PFEIFFER, JAMES A PH#: 864-725-4111 Fac. Cont. Email:No Fac Cont. email on record	HTL-0038 / 12/31/2009 Greenwood / County 1325 SPRING ST GREENWOOD, SC 29646-3860 GREENWOOD COUNTY HOSPITAL BOARD	414
Licensed Beds: General: 354 Psychiatric: 36 Rehab: 0 Substance Abuse 24 Other Beds NICU: 7 Neonatal Special Care 11		

Certifications:Abortions, Trauma Center Level III, Perinatal Level III, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	2	Number Licensed Units	448
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Number of Activities/Facilities licensed in county of Greenwood	# Lics	2
Number Licensed Units :	448	

County: Hampton

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
HAMPTON REGIONAL MEDICAL CENTER	HTL-0027 / 07/31/2009	32
595 W CAROLINA AVE	Hampton / Non-Profit Corporation	
VARNVILLE, SC 29944	PO BOX 338	
HAMILL, DAVID H PH#: 803-943-2771	VARNVILLE, SC 29944-0338	
Fac. Cont. Email: JALLEN@HAMPTONREGIONAL.ORG	HAMPTON REGIONAL MEDICAL CENTER	
Licensed Beds: General: 32	Psychiatric: 0	Rehab: 0
Other Beds	NICU: 0	Substance Abuse 0
	Neonatal Special Care 0	

Certifications: None

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	32

Number of Activities/Facilities licensed in county of Hampton	# Lics	1
Number Licensed Units :	32	

Division of Health Licensing

County: Horry

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	

CONWAY HOSPITAL INC	HTL-0083 / 05/31/2009	160
300 SINGLETON RIDGE RD	Horry / Non-Profit Corporation	
CONWAY, SC 29526	PO BOX 829	
CLAYTON, PHILIP A PH#: 843-347-8114	CONWAY, SC 29528	
Fac. Cont. Email: PCLAYTON@CMC-SC.COM	CONWAY HOSPITAL INC	

Licensed Beds: General: 160	Psychiatric: 0	Rehab: 0	Substance Abuse: 0
Other Beds	NICU: 0	Neonatal Special Care: 6	

Certifications: Trauma Center Level III, Perinatal Level II, JCAHO Accredited

GRAND STRAND REGIONAL MEDICAL CENTER	HTL-0770 / 04/30/2009	219
809 82ND PKWY	Horry / Ltd. Liability	
MYRTLE BEACH, SC 29572-4607	809 82ND PKWY	
WHITE, DOUG PH#: 843-692-1100	MYRTLE BEACH, SC 29572	
Fac. Cont. Email: WENDY.STRICKLAND@HCAHEALTHCARE.COM	GRAND STRAND REGIONAL MEDICAL CENTER LLC	

Licensed Beds: General: 219	Psychiatric: 0	Rehab: 0	Substance Abuse: 0
Other Beds	NICU: 0	Neonatal Special Care: 2	

Certifications: Trauma Center Level III, Perinatal Level II, JCAHO Accredited

LIGHTHOUSE CARE CENTER OF CONWAY - ACUTE CARE	HTL-0898 / 01/31/2010	52
152 WACCAMAW MEDICAL PARK DR	Horry / Corporation	
CONWAY, SC 29526-0000	152 WACCAMAW MEDICAL PARK DR	
MOORE, ALAN W PH#: 843-347-8871	CONWAY, SC 29526	
Fac. Cont. Email: No Fac Cont. email on record	HHC SOUTH CAROLINA INC	

Licensed Beds: General: 0	Psychiatric: 44	Rehab: 0	Substance Abuse: 8
Other Beds	NICU: 0	Neonatal Special Care: 0	

Certifications: JCAHO Accredited

LORIS COMMUNITY HOSPITAL	HTL-0033 / 12/31/2009	105
3655 MITCHELL ST	Horry / District	
LORIS, SC 29569	PO BOX 690001	
BROWNE, J TIMOTHY PH#: 843-716-7000	LORIS, SC 29569	
Fac. Cont. Email: TBROWNE@SCCOAST.COM	LORIS COMMUNITY HOSPITAL DISTRICT	

Licensed Beds: General: 105	Psychiatric: 0	Rehab: 0	Substance Abuse: 0
Other Beds	NICU: 0	Neonatal Special Care: 0	

Certifications: Trauma Center Level III, Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	4	Number Licensed Units	536
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Number of Activities/Facilities licensed in county of	Horry	# Lics	4
	Number Licensed Units :	536	

County: Jasper

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
COASTAL CAROLINA HOSPITAL	HTL-0902 / 06/30/2009	41
1000 MEDICAL CENTER DR	Jasper / Corporation	
HARDEEVILLE, SC 29927	1000 MEDICAL CENTER DR	
URQUHART, TERESA PH#: 843-784-8201	HARDEEVILLE, SC 29927	
Fac. Cont. Email: No Fac Cont. email on record	COASTAL CAROLINA MEDICAL CENTER INC	
Licensed Beds: General: 31 Psychiatric: 0 Rehab: 10 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications:Swing Bed Unit(s), JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary		
Number of Activities/Facilities licensed:	1	Number Licensed Units 41

Number of Activities/Facilities licensed in county of Jasper	# Lics 1
	Number Licensed Units : 41

County: Kershaw

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
KERSHAW COUNTY MEDICAL CENTER	HTL-0101 / 10/31/2009	121
1315 ROBERTS ST	Kershaw / County	
CAMDEN, SC 29020	PO BOX 7003	
WEEKS, DONNIE J PH#: 803-432-4311	COLUMBIA, SC 29201-7003	
Fac. Cont. Email: WEEKS@KCMC.ORG	KERSHAW COUNTY MEDICAL CENTER	
Licensed Beds: General: 121 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	<input type="text" value="1"/>	Number Licensed Units	<input type="text" value="121"/>
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Number of Activities/Facilities licensed in county of	Kershaw	# Lics	1
	Number Licensed Units :	121	

County: Lancaster

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
SPRINGS MEMORIAL HOSPITAL	HTL-0657 / 12/31/2009	217
800 W MEETING ST	Lancaster / Corporation	
LANCASTER, SC 29720	800 W MEETING ST	
MCDUGAL JR, TOM R PH#: 803-286-1481	LANCASTER, SC 29720	
Fac. Cont. Email:JOAN_BURRESS@HQ.CHS.NET	LANCASTER HOSPITAL CORPORATION	
Licensed Beds: General: 199 Psychiatric: 0 Rehab: 0 Substance Abuse 18		
Other Beds NICU: 0 Neonatal Special Care 4		
Certifications:Abortions, Perinatal Level II, JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary		
Number of Activities/Facilities licensed:	1	Number Licensed Units
		217

Number of Activities/Facilities licensed in county of Lancaster	# Lics	1
	Number Licensed Units :	217

County: Laurens

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
LAURENS COUNTY HOSPITAL	HTL-0531 / 11/30/2009	76
22725 HWY 76 E	Laurens / District	
CLINTON, SC 29325	PO BOX 976	
DALBERTO, RICHARD E PH#: 864-833-9100	CLINTON, SC 29325-0976	
Fac. Cont. Email: No Fac Cont. email on record	LAURENS COUNTY HEALTH CARE SYSTEM	
Licensed Beds: General: 76	Psychiatric: 0	Rehab: 0
Other Beds	NICU: 0	Substance Abuse 0
	Neonatal Special Care 0	

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary		
Number of Activities/Facilities licensed:	1	Number Licensed Units 76

Number of Activities/Facilities licensed in county of Laurens	# Lics	1
	Number Licensed Units :	76

County: Lee

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
LEE CORRECTIONAL INSTITUTION INFIRMARY	HTL-0873 / 03/31/2010	20
1204 E CHURCH ST	Lee / State	
BISHOPVILLE, SC 29010	1204 E CHURCH ST	
MCDONALD, YVONNE PH#: 803-896-2400	BISHOPVILLE, SC 29010	
Fac. Cont. Email: No Fac Cont. email on record	SC DEPT OF CORRECTIONS	
Licensed Beds: General: 20 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: None

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	20

Number of Activities/Facilities licensed in county of Lee	# Lics	1
Number Licensed Units :	20	

Division of Health Licensing

County: Lexington

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
LEXINGTON MEDICAL CENTER	HTL-0500 / 03/31/2009 (Renewal Pending)	384
2720 SUNSET BLVD	Lexington / County	
WEST COLUMBIA, SC 29169-4810	2720 SUNSET BLVD	
BIEDIGER, MICHAEL J PH#: 803-791-2000	WEST COLUMBIA, SC 29169-4810	
Fac. Cont. Email: No Fac Cont. email on record	LEXINGTON COUNTY HEALTH SERVICES DISTRICT INC	
Licensed Beds: General: 384 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 20		
Certifications: Abortions, Trauma Center Level III, Perinatal Level II, JCAHO Accredited		
SOUTH CAROLINA VOCATIONAL REHABILITATION EVALUATION CENTER	HTL-0426 / 09/30/2009	30
1400 BOSTON AVE	Lexington / State	
WEST COLUMBIA, SC 29170	1400 BOSTON AVE	
RZEPKOWSKI, DEBRA PH#: 803-896-6500	WEST COLUMBIA, SC 29170	
Fac. Cont. Email: RZEPKOWSKI@SCVRDSTATESC.US	SOUTH CAROLINA VOCATIONAL REHABILITATION DEPARTMENT	
Licensed Beds: General: 30 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: None		
THREE RIVERS BEHAVIORAL HEALTH LLC	HTL-0808 / 10/31/2009	66
2900 SUNSET BLVD	Lexington / Ltd. Liability	
WEST COLUMBIA, SC 29169-3422	2900 SUNSET BLVD	
BARNETT, JEFF PH#: 803-796-9911	WEST COLUMBIA, SC 29169	
Fac. Cont. Email: JEFF.BARNETT@PSYSOLUTIONS.COM	THREE RIVERS BEHAVIORAL HEALTH LLC	
Licensed Beds: General: 0 Psychiatric: 49 Rehab: 0 Substance Abuse 17		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: Number Licensed Units

Number of Activities/Facilities licensed in county of Lexington # Lics 3
Number Licensed Units : 480

County: Marion

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
MARION COUNTY MEDICAL CENTER	HTL-0827 / 09/30/2009	124
2829 E HWY 76	Marion / Non-Profit Corporation	
MULLINS, SC 29574-6035	PO BOX 1150	
TUCKER, HAROLD E PH#: 843-431-2000	MARION, SC 29571	
Fac. Cont. Email:GTUCKER@MCMED.ORG	MARION REGIONAL HEALTHCARE SYSTEM	
Licensed Beds: General: 124 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 2		
Certifications:Perinatal Level II, JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	124

Number of Activities/Facilities licensed in county of Marion	# Lics	1
Number Licensed Units :	124	

County: Marlboro

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
MARLBORO PARK HOSPITAL	HTL-0677 / 06/30/2009	102
1138 CHERAW ST, HWY 9 & 38	Marlboro / Limited Liability Limited Partnership	
BENNETTSVILLE, SC 29512-0738	PO BOX 738	
REECE, JEFF PH#: 843-479-2881	BENNETTSVILLE, SC 29512	
Fac. Cont. Email: No Fac Cont. email on record	CHESTERFIELD/MARLBORO L P	
Licensed Beds: General: 94 Psychiatric: 8 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: Abortions, Swing Bed Unit(s), Perinatal Level I, JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	102

Number of Activities/Facilities licensed in county of Marlboro	# Lics	1
Number Licensed Units :	102	

County: Newberry

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
NEWBERRY COUNTY MEMORIAL HOSPITAL	HTL-0015 / 01/31/2010	90
2669 KINARD ST	Newberry / County	
NEWBERRY, SC 29108-2932	PO BOX 497	
BEASLEY, LYNN W PH#: 803-276-7570	NEWBERRY, SC 29108	
Fac. Cont. Email:LYNN.BEASLEY@NEWBERRYHOSPITAL.NET	NEWBERRY COUNTY MEMORIAL HOSPITAL	
Licensed Beds: General: 90 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications:Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	90

Number of Activities/Facilities licensed in county of Newberry	# Lics	1
Number Licensed Units :	90	

County: Oconee

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
OCONEE MEMORIAL HOSPITAL	HTL-0062 / 08/31/2009	160
298 MEMORIAL DR	Oconee / Corporation	
SENECA, SC 29672-9943	298 MEMORIAL DR	
WARD, JEANNE L PH#: 864-882-3351	SENECA, SC 29672-9943	
Fac. Cont. Email: JEANNE.WARD@OCONEEMED.ORG	OCONEE MEMORIAL HOSPITAL INC	
Licensed Beds: General: 160 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: Abortions, Perinatal Level I, JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	160

Number of Activities/Facilities licensed in county of Oconee	# Lics	1
Number Licensed Units :		160

County: Orangeburg

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
REGIONAL MEDICAL CENTER OF ORANGEBURG/CALHOUN COUNTIES 3000 ST MATTHEWS RD ORANGEBURG, SC 29118-1498 DANDRIDGE JR, THOMAS C PH#: 803-395-2200 Fac. Cont. Email:TRMCHEALTH.ORG	HTL-0046 / 05/31/2009 Orangeburg / Non-Profit Corporation 3000 ST MATTHEWS RD ORANGEBURG, SC 29118-1498 REGIONAL MEDICAL CENTER OF ORANGEBURG & CALHOUN COUNTIES	286
Licensed Beds: General: 247 Psychiatric: 15 Rehab: 24 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 10		
Certifications:Abortions, Trauma Center Level III, Perinatal Level II, JCAHO Accredited		
WILLIAM J MCCORD ADOLESCENT TREATMENT FACILITY 910 COOK RD ORANGEBURG, SC 29116-1166 FOWLER, RICHARD S PH#: 803-534-2328 Fac. Cont. Email:SBETHUNE@TCCADA.STATE.SC.US	HTL-0619 / 10/31/2009 Orangeburg / County PO BOX 1166 ORANGEBURG, SC 29116 TRI-COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE	15
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 0 Substance Abuse 15 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:None		

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	<input type="text" value="2"/>	Number Licensed Units	<input type="text" value="301"/>
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Number of Activities/Facilities licensed in county of	Orangeburg	# Lics	2
	Number Licensed Units :	301	

County: Pickens

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
CANNON MEMORIAL HOSPITAL	HTL-0076 / 06/30/2009	55
123 W G ACKER DR	Pickens / Non-Profit Corporation	
PICKENS, SC 29671	PO BOX 188	
RENTZ, NORMAN G PH#: 864-878-4791	PICKENS, SC 29671-0188	
Fac. Cont. Email:NRENTZ@CMHSC.ORG	CANNON MEMORIAL HOSPITAL	
Licensed Beds: General: 55 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications:JCAHO Accredited

PALMETTO BAPTIST MEDICAL CENTER EASLEY	HTL-0743 / 02/28/2010	109
200 FLEETWOOD DR	Pickens / County	
EASLEY, SC 29640-2129	PO BOX 2129	
GETTYS III, RODDEY E PH#: 864-442-7200	EASLEY, SC 29641-2129	
Fac. Cont. Email:RODDEY.GETTYS@PALMETTOHEALTH.ORG	PALMETTO HEALTH	
Licensed Beds: General: 109 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 4		

Certifications:Abortions, Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	2	Number Licensed Units	164
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Number of Activities/Facilities licensed in county of	Pickens	# Lics	2
	Number Licensed Units :	164	

Division of Health Licensing

County: Richland

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
COLUMBIA CARE CENTER 7901 FARROW RD COLUMBIA, SC 29203 WYATT, ELDON L PH#: 803-935-0505 Fac. Cont. Email: No Fac Cont. email on record	HTL-0756 / 09/30/2009 Richland / Corporation PO BOX 23587 COLUMBIA, SC 29224 JUST CARE INC	196
Licensed Beds: General: 196 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: None		
CRAFTS FARROW STATE HOSPITAL FORENSIC BUILDING 1 7901 FARROW RD COLUMBIA, SC 29203 GETZ, PETER M PH#: 803-935-7339 Fac. Cont. Email: No Fac Cont. email on record	HTL-0907 / 11/30/2009 Richland / State 7901 FARROW RD COLUMBIA, SC 29203 SC DEPARTMENT OF MENTAL HEALTH	50
Licensed Beds: General: 0 Psychiatric: 50 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: None		
G WERBER BRYAN PSYCHIATRIC HOSPITAL 220 FAISON DR COLUMBIA, SC 29203 GETZ, PETER M PH#: 803-935-7339 Fac. Cont. Email: No Fac Cont. email on record	HTL-0515 / 02/28/2010 Richland / State 220 FAISON DR COLUMBIA, SC 29203 SC DEPARTMENT OF MENTAL HEALTH	466
Licensed Beds: General: 0 Psychiatric: 466 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: JCAHO Accredited		
GILLIAM PSYCHIATRIC HOSPITAL 4344 BROAD RIVER RD COLUMBIA 29210 PAGE, JAMES E PH#: 803-896-8597 Fac. Cont. Email: No Fac Cont. email on record	HTL-0431 / 10/31/2009 Richland / State 4344 BROAD RIVER RD COLUMBIA, SC 29210 SC DEPT OF CORRECTIONS	87
Licensed Beds: General: 0 Psychiatric: 87 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: None		
HEALTHSOUTH REHABILITATION HOSPITAL OF COLUMBIA 2935 COLONIAL DR COLUMBIA, SC 29203 ROGERS, JAMES H PH#: 803-401-1400 Fac. Cont. Email: JAMES.ROGERS@HEALTHSOUTH.COM	HTL-0504 / 01/31/2010 Richland / Corporation 2935 COLONIAL DR COLUMBIA, SC 29203 HEALTHSOUTH OF SOUTH CAROLINA INC	96
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 96 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: JCAHO Accredited		

Division of Health Licensing

County: Richland

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
INTERMEDICAL HOSPITAL OF SOUTH CAROLINA TAYLOR AT MARION ST COLUMBIA, SC 29220 COLOMBO, ARMANDO E PH#: 803-296-5425 Fac. Cont. Email:ACOLOMBO@INTERMEDICAL.US	HTL-0760 / 10/31/2009 Richland / Corporation TAYLOR AT MARION ST COLUMBIA, SC 29220 INTERMEDICAL HOSPITAL OF SOUTH CAROLINA INC	35
Licensed Beds: General: 35 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:None		
KIRKLAND CORRECTIONAL INSTITUTION INFIRMARY 4344 BROAD RIVER RD COLUMBIA, SC 29210 HODGE, RACHEL PH#: 803-896-8572 Fac. Cont. Email:No Fac Cont. email on record	HTL-0385 / 10/31/2009 Richland / State 4344 BROAD RIVER RD COLUMBIA, SC 29210 SC DEPT OF CORRECTIONS	24
Licensed Beds: General: 24 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:None		
MORRIS VILLAGE 610 FAISON DR COLUMBIA, SC 29203-3298 GETZ, PETER M PH#: 803-935-7339 Fac. Cont. Email:No Fac Cont. email on record	HTL-0516 / 05/31/2009 Richland / State 610 FAISON DR, 2ND FLOOR A - BUILDING COLUMBIA, SC 29203 SC DEPARTMENT OF MENTAL HEALTH	174
Licensed Beds: General: 11 Psychiatric: 0 Rehab: 0 Substance Abuse 163 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:None		
PALMETTO HEALTH BAPTIST TAYLOR AT MARION ST COLUMBIA, SC 29201 BRIDGES, JAMES M PH#: 803-296-5678 Fac. Cont. Email:No Fac Cont. email on record	HTL-0739 / 02/28/2010 Richland / County TAYLOR AT MARION ST COLUMBIA, SC 29201 PALMETTO HEALTH	467
Licensed Beds: General: 363 Psychiatric: 94 Rehab: 0 Substance Abuse 10 Other Beds NICU: 8 Neonatal Special Care 22		
Certifications:Abortions, Perinatal Level III, JCAHO Accredited		

Division of Health Licensing

County: Richland

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
PALMETTO HEALTH RICHLAND 5 RICHLAND MEDICAL PARK DR COLUMBIA, SC 29201 SINGERLING, JOHN J PH#: 803-434-7000 Fac. Cont. Email: JULIE.BROWN@PALMETTOHEALTH.ORG	HTL-0741 / 02/28/2010 Richland / County 5 RICHLAND MEDICAL PARK DR COLUMBIA, SC 29203-6863 PALMETTO HEALTH	649
Licensed Beds: General: 579 Psychiatric: 60 Rehab: 0 Substance Abuse 10 Other Beds NICU: 31 Neonatal Special Care 34		
Certifications: Abortions, Trauma Center Level I, Perinatal Level III Regional, JCAHO Accredited, Crisis Stabilization Beds		
PROVIDENCE HOSPITAL 2435 FOREST DR COLUMBIA, SC 29204-2026 ZARA, GEORGE A PH#: 803-256-5300 Fac. Cont. Email: No Fac Cont. email on record	HTL-0820 / 07/31/2009 Richland / Corporation 2435 FOREST DR COLUMBIA, SC 29204-2026 SISTERS OF CHARITY PROVIDENCE HOSPITALS	258
Licensed Beds: General: 258 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: JCAHO Accredited		
PROVIDENCE HOSPITAL NORTHEAST 120 GATEWAY CORPORATE BLVD COLUMBIA, SC 29203-9611 ZARA, GEORGE A PH#: 803-256-5300 Fac. Cont. Email: No Fac Cont. email on record	HTL-0821 / 07/31/2009 Richland / Corporation 2435 FOREST DR COLUMBIA, SC 29204-2098 SISTERS OF CHARITY PROVIDENCE HOSPITALS	46
Licensed Beds: General: 46 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: Perinatal Level I, JCAHO Accredited		
SOUTH CAROLINA STATE HOSPITAL 2100 BULL ST COLUMBIA, SC 29202 GETZ, PETER M PH#: 803-935-7339 Fac. Cont. Email: No Fac Cont. email on record	HTL-0513 / 02/28/2010 Richland / State 2100 BULL ST COLUMBIA, SC 29202 SC DEPARTMENT OF MENTAL HEALTH	144
Licensed Beds: General: 0 Psychiatric: 144 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: None		

Division of Health Licensing

County: Richland

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
WILLIAM S HALL PSYCHIATRIC INSTITUTE	HTL-0514 / 02/28/2010	89
1800 COLONIAL DR	Richland / State	
COLUMBIA, SC 29203-6827	1800 COLONIAL DR	
GETZ, PETER M PH#: 803-935-7339	COLUMBIA, SC 29203-6827	
Fac. Cont. Email: No Fac Cont. email on record	SC DEPARTMENT OF MENTAL HEALTH	
Licensed Beds: General: 0 Psychiatric: 89 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: JCAHO Accredited

WILLOW LANE INFIRMARY	HTL-0274 / 06/30/2009	8
4650 BROAD RIVER RD	Richland / State	
COLUMBIA, SC 29210	4650 BROAD RIVER RD	
SOLTIS, SAMUEL L PH#: 803-896-9107	COLUMBIA, SC 29210	
Fac. Cont. Email: No Fac Cont. email on record	S C DEPARTMENT OF JUVENILE JUSTICE	
Licensed Beds: General: 8 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: None

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	15	Number Licensed Units	2,789
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Number of Activities/Facilities licensed in county of	Richland	# Lics	15
	Number Licensed Units :	2,789	

Division of Health Licensing

County: Spartanburg

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
CHILDREN'S HABILITATION CENTER 355 CEDAR SPRINGS RD SPARTANBURG, SC 29302-4699 SMITH, REBECCA A PH#: 864-577-7677 Fac. Cont. Email: RSMITH@SCSDB.K12.SC.US	HTL-0449 / 06/30/2009 Spartanburg / State 355 CEDAR SPRINGS RD SPARTANBURG, SC 29302-4699 S C SCHOOL FOR THE DEAF BLIND & MULTI-HANDICAPPED	22
Licensed Beds: General: 22 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: None		
MARY BLACK MEMORIAL HOSPITAL 1700 SKYLYN DR SPARTANBURG, SC 29307 WRIGHT, PHILLIP L PH#: 864-573-3000 Fac. Cont. Email: No Fac Cont. email on record	HTL-0704 / 07/31/2009 Spartanburg / Ltd. Liability PO BOX 3217 SPARTANBURG, SC 29304-3217 MARY BLACK HEALTH SYSTEM L L C	209
Licensed Beds: General: 176 Psychiatric: 15 Rehab: 18 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 10		
Certifications: Perinatal Level II, JCAHO Accredited		
SPARTANBURG HOSPITAL FOR RESTORATIVE CARE 389 SERPENTINE DR SPARTANBURG, SC 29303 BUTLER, ANITA M PH#: 864-560-3235 Fac. Cont. Email: ABUTLER@SRHS.COM	HTL-0685 / 08/31/2009 Spartanburg / District 389 SERPENTINE DR SPARTANBURG, SC 29303 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC	97
Licensed Beds: General: 97 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: JCAHO Accredited		
SPARTANBURG REGIONAL MEDICAL CENTER 101 E WOOD ST SPARTANBURG, SC 29303-3040 ANGERMEIER, INGO PH#: 864-560-6000 Fac. Cont. Email: No Fac Cont. email on record	HTL-0125 / 03/31/2010 Spartanburg / District 101 E WOOD ST SPARTANBURG, SC 29303 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC	540
Licensed Beds: General: 484 Psychiatric: 56 Rehab: 0 Substance Abuse 0 Other Beds NICU: 13 Neonatal Special Care 22		
Certifications: Trauma Center Level I, Perinatal Level III Regional, JCAHO Accredited		
VILLAGE HOSPITAL 250 WESTMORELAND RD GREER, SC 29651-9013 PARKS, DAVID H PH#: 864-530-6000 Fac. Cont. Email: DPARKS@VILLAGEATPELHAM.COM	HTL-0905 / 09/30/2009 Spartanburg / District 250 WESTMORELAND RD GREER, SC 29651-9013 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC	48
Licensed Beds: General: 48 Psychiatric: 0 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		
Certifications: Perinatal Level I		

County: Spartanburg

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date
Location Street	County/Ownership Typ
Location City, State	Mailing/Billing Addres
Administrator/Phone	Licensee
	Licensed Unit

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:	5	Number Licensed Units	916
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Number of Activities/Facilities licensed in county of	Spartanburg	# Lics	5
	Number Licensed Units :	916	

County: Sumter

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
TUOMEY	HTL-0096 / 07/31/2009	283
129 N WASHINGTON ST	Sumter / Non-Profit Corporation	
SUMTER, SC 29150	129 N WASHINGTON ST	
COX, JAY PH#: 803-774-9000	SUMTER, SC 29150	
Fac. Cont. Email: No Fac Cont. email on record	TUOMEY	
Licensed Beds: General: 283	Psychiatric: 0	Rehab: 0
Other Beds	NICU: 0	Substance Abuse 0
	Neonatal Special Care 22	

Certifications: Abortions, Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	283

Number of Activities/Facilities licensed in county of	Sumter	# Lics	1
	Number Licensed Units :	283	

County: Union

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
WALLACE THOMSON HOSPITAL	HTL-0017 / 10/31/2009	143
322 W SOUTH ST	Union / District	
UNION, SC 29379	PO BOX 789	
LEONARD, WILLIAM H PH#: 864-427-0351	UNION, SC 29379-0789	
Fac. Cont. Email: No Fac Cont. email on record	UNION HOSPITAL DISTRICT	
Licensed Beds: General: 143 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		
Certifications:Swing Bed Unit(s), Perinatal Level I, JCAHO Accredited		

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	143

Number of Activities/Facilities licensed in county of Union	# Lics	1
Number Licensed Units :	143	

County: Williamsburg

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
WILLIAMSBURG REGIONAL HOSPITAL	HTL-0841 / 10/31/2009	25
500 NELSON BLVD	Williamsburg / Non-Profit Corporation	
KINGSTREE, SC 29556-4027	PO BOX 568	
HALES, JOHN C PH#: 843-355-8888	KINGSTREE, SC 29556-0568	
Fac. Cont. Email: JGAMBLE@WMBGRH.COM	WILLIAMSBURG REGIONAL HOSPITAL INC	
Licensed Beds: General: 25	Psychiatric: 0	Rehab: 0
Other Beds	NICU: 0	Substance Abuse 0
	Neonatal Special Care 0	

Certifications: JCAHO Accredited, Critical Access Hospital

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	1
Number Licensed Units	25

Number of Activities/Facilities licensed in county of Williamsburg	# Lics	1
Number Licensed Units :	25	

Division of Health Licensing

County: York

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
HEALTHSOUTH REHABILITATION HOSPITAL OF ROCK HILL 1795 DR FRANK GASTON BLVD ROCK HILL, SC 29732 JACKSON, WILLIAM A PH#: 803-326-3605 Fac. Cont. Email: ANTHONY.JACKSON@HEALTHSOUTH.COM	HTL-0791 / 03/31/2009 (Renewal Pending) YORK / Ltd. Liability 1795 DR FRANK GASTON BLVD ROCK HILL, SC 29732 PIEDMONT HEALTHSOUTH REHABILITATION L L C	40
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 40 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: JCAHO Accredited

PIEDMONT MEDICAL CENTER 222 S HERLONG AVE ROCK HILL, SC 29732 MILLER, CHARLES F PH#: 803-329-1234 Fac. Cont. Email: CHARLES.MILLER@TENETHEALTH.COM	HTL-0417 / 01/31/2010 York / Corporation 222 S HERLONG AVE ROCK HILL, SC 29732 AMISUB OF SOUTH CAROLINA INC	288
Licensed Beds: General: 268 Psychiatric: 20 Rehab: 0 Substance Abuse 0 Other Beds NICU: 0 Neonatal Special Care 12		

Certifications: Abortions, Trauma Center Level III, Perinatal Level II-E, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary		
Number of Activities/Facilities licensed:	2	Number Licensed Units 328

Number of Activities/Facilities licensed in county of York	# Lics	2
	Number Licensed Units :	328

Report Total

Total Number of Activities/Facilities licensed	103	Total Number Licensed Units	14,727
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